

Updates to NHSN for IRF Locations within Acute Care & Critical Access Facilities

NHSN version 6.6.1 allows users with inpatient rehabilitation units within acute care and critical access facilities to appropriately designate whether the unit is a separately licensed IRF. This applies only to those units who have an 'R' or 'I' in the 3rd position of their CMS Certification Number (CCN). It's important to note that rehab units within acute care and critical access facilities will have a different CCN than the acute care or critical access facility itself. Therefore, it is essential to double check the CCN with the billing/administrative departments at your facility prior to moving forward with location set-up.

The updated functionality within NHSN will allow users to designate specific rehab locations within the facility as separately licensed CMS units. In addition, users will be able to enter the rehab specific CCN, thus allowing the data to be appropriately sent to CMS to satisfy IRF PPS reporting requirements. Furthermore, upon indicating that the rehab unit is separately licensed, users will be prompted to fill out a brief section of the rehab specific annual survey in order to properly risk adjust the data.

The following instructions will demonstrate three different scenarios that could be applicable to your facility: A) users without a rehab location currently mapped within their NHSN facility, B) users that already have a rehab location mapped within their facility, or C) users that already have a rehab location mapped within their facility, but do not update it using NHSN's location manager before creating or editing a reporting plan.

Scenario A: Users without rehab locations currently mapped within their NHSN facility

Step 1: Adding the rehab location

- Go to the location manager screen by clicking on 'Facility' then 'Locations' on the left-hand navigation bar
- Enter the 'Your code' and 'Your label' values that will help you to identify the new rehab location among the other locations already mapped in your NHSN facility

The screenshot shows the NHSN web application interface. At the top is the CDC logo and the text "Department of Health and Human Services Centers for Disease Control and Prevention". Below this is a navigation bar with "NHSN - National Healthcare Safety Network (ISD-CLFT-NHSN1:8081)" and links for "NHSN Home", "My Info", "Contact us", "Help", and "Log Out". The left-hand navigation menu includes "NHSN Home", "Reporting Plan", "Patient", "Event", "Procedure", "Summary Data", "Import/Export", "Auto CDA Sim", "Analysis", "Surveys", "Users", "Facility", "Group", and "Log Out". The "Facility" menu is expanded, showing sub-items: "Customize Forms", "Facility Info", "Add/Edit Component", "Locations", and "Surgeons". The "Locations" sub-item is highlighted with a red arrow labeled "1". The "Add/Edit Component" sub-item is also highlighted with a red arrow labeled "2". The main content area is titled "Locations" and contains a "HELP Instructions" section. The instructions list actions: "Add", "Find", "Edit", and "Delete". Below the instructions, a note states: "Mandatory fields to 'Add' or 'Edit' a record marked with *". The form fields are: "Your Code*" (text box with "REHAB"), "Your Label*" (text box with "REHAB UNIT"), "CDC Location Description*" (dropdown menu), "Status*" (dropdown menu with "Active" selected), and "Bed Size:" (text box with "0"). A note next to the "Bed Size" field states: "A bed size greater than zero is required for most inpatient locations." At the bottom of the form are three buttons: "Find", "Add", and "Clear". Red arrows labeled "3" and "4" point to the "Your Code" and "Your Label" fields respectively.

- In the CDC Location Description drop down menu, select the appropriate rehab designation ('Inpatient Rehabilitation Ward' or 'Inpatient Pediatric Rehabilitation Ward')
- Upon selecting the appropriate rehab designation, the additional questions will appear as shown below
 - If you wish to designate this rehab location as an IRF unit you will select 'Yes' in response to 'Is this location a CMS IRF unit within a hospital?', and then you will be prompted to enter the IRF's CCN
 - It is very important to make sure you are correctly entering your CCN
 - In order to qualify as a CMS IRF rehab unit within an acute care or critical access facility, the CCN must have a 'R' or 'T' in the 3rd position
 - If the CCN does not have a 'R' or 'T' in the 3rd position but instead has the last four digits between 3025-3099, the IRF must be enrolled as a separate facility and NOT as a location within the acute care facility
 - After completing all of the questions, click 'Add' to add the location

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Logged into DHQP Sievert Memorial (ID 10471) as ISAS.
Facility DHQP Sievert Memorial (ID 10471) is following the PS component.

Locations

Instructions

- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One of more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the **Save** button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

Your Code*: REHAB

Your Label*: REHAB UNIT

CDC Location Description*: Inpatient Rehabilitation Ward

Is this location a CMS IRF unit within a hospital?*: Y - Yes

If Yes, specify the IRF CCN (will have an R or T in the 3rd position)*: 50T079

Status*: Active

Bed Size*: 15 A bed size greater than zero is required for most inpatient locations.

Find Add Clear

- Upon clicking 'Add', you'll be prompted to complete a brief annual survey that is specific to this rehab unit
 - Click 'Okay' to view and print the survey

Locations

HELP Instructions

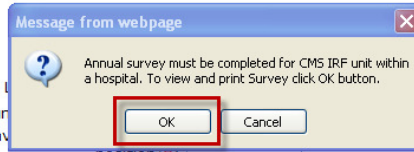
- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One of more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the **Save** button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

CDC I
 Is this location a CMS IRF unit?
 If Yes, specify the IRF CCN (will have
 position):
 Status*: Active
 Bed Size*: 10 A bed size greater than zero is required for most inpatient locations.

Ward

Find Save Clear



- Only answer the questions in the black Facility Details box shown below (no further answers are needed as they were provided on the annual acute care facility survey)
 - Be sure to use data from the **full calendar year of 2011 for this specific rehab location**
 - Round all numbers to the nearest whole number as decimals will not be accepted (i.e., average daily census)

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OMB No. 0920-0066
Exp. Date: 01-31-2015
www.cdc.gov/nhsn

Patient Safety Component—Annual Facility Survey for IRF

*required for saving	Tracking #:
*Facility ID:	*Survey Year:
Facility Characteristics	
*Ownership (check one):	
<input type="checkbox"/> For profit <input type="checkbox"/> Not for profit, including church <input type="checkbox"/> Government <input type="checkbox"/> Veterans Affairs	
*Affiliation (check one):	
<input type="checkbox"/> Independent <input type="checkbox"/> Multi-facility organization (specialty network) <input type="checkbox"/> Hospital system <input type="checkbox"/> Managed care organization	
*How would you describe your licensed inpatient rehabilitation facility? (check one)	
<input type="checkbox"/> Free-standing <input type="checkbox"/> Healthcare facility based	
Facility Details (CMS Licensed IRF Locations within hospitals fill out Facility Details section only)	
In the previous calendar year, indicate: <input type="checkbox"/> No CMS licensed IRF unit operational in this survey year	
*Total number of beds:	_____
*Average daily census:	_____
*Number of patient days:	_____
*Average length of stay:	_____
*Indicate the number of admissions with the primary diagnosis for each of the following rehabilitation categories (<u>must sum to the total number of admissions listed below</u>)	
a. Traumatic spinal cord dysfunction:	_____
b. Non-traumatic spinal cord dysfunction:	_____
c. Stroke:	_____
d. Brain dysfunction (non-traumatic or traumatic):	_____
e. Other neurologic conditions (e.g. multiple sclerosis, Parkinson's disease, etc):	_____
f. Orthopedic conditions (incl. fracture, joint replacement, other):	_____
g. All other admissions:	_____
*Total number of admissions:	_____
*Number of admissions on a ventilator:	_____
*Number of pediatric (≤ 18 years old) admissions:	_____
Facility Surveillance Policies	
*Number of trained or certified infection preventionists (IPs) in facility:	_____

Step 2: Adding the rehab-specific survey

- In the left-hand navigation bar, click on 'Surveys' and then 'Add'
 - From survey type drop down menu select 'REHSRV-PS – Survey for CMS IRF Unit'
 - Select 2011 as the survey year
 - Answer the questions using 2011 data for the rehab unit only



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Logged into DHQP Memorial Annex (ID 10401) as ISAB.
Facility DHQP Memorial Annex (ID 10401) is following the PS component.

Add Annual Survey

HELP

Print Survey for CMS IRF Unit

Mandatory fields marked with *

Facility ID: *

Survey Type: *

Survey Year: *

In the previous calendar year, indicate: ☐ No CMS licensed IRF operational in this survey year

Total number of Beds: *

Average daily census: *

Number of Patient Days: *

Average length of stay: *

Indicate the number of admissions with the primary diagnosis for each of the following rehabilitation categories **(must sum to the total admissions listed below)**

a. Traumatic spinal cord dysfunction: *

b. Non-traumatic spinal cord dysfunction: *

c. Stroke: *

d. Brain dysfunction (non-traumatic or traumatic): *

e. Other neurologic conditions (e.g. multiple sclerosis, Parkinson's disease, etc): *

f. Orthopedic conditions (incl. fracture, joint replacement, other): *

g. All other admissions: *


Total number of admissions: 70

Number of admissions on a ventilator: *

Number of pediatric (<= 18 years old) admissions: *

Save Back

- After entering all of the information click 'Save'
- You will then receive a confirmation message that the survey has been created successfully



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Logged into DHQP Sievert Memorial (ID 10471) as ISAB.
Facility DHQP Sievert Memorial (ID 10471) is following the PS component.

Add Annual Survey

✓ Patient Safety Annual Survey created successfully.

Step 3: Add rehab location to reporting plan and begin reporting

- Add the rehab location to each month's reporting plan that you plan to do surveillance
 - Please note that only data from locations included in a month's reporting plan will be shared with CMS
- Enter all CAUTI events using the NHSN CAUTI criteria for each month of surveillance
- Enter summary data for urinary catheter days and patient days each month

Scenario B: Users that already have a rehab location mapped within their NHSN facility

Step 1: Updating the existing rehab location

- Go to the location manager screen by clicking on 'Facility' then 'Locations' on the left-hand navigation bar
- From the CDC Location Description drop down menu, select 'Inpatient Rehabilitation Ward' or 'Inpatient Pediatric Rehabilitation Ward' to find the rehab locations already mapped within your facility
 - Leaving all other fields blank, click the grey 'Find' button
- Scroll down the screen to see the Location table
 - You should see the rehab unit(s) that you have previously mapped
- Click on the underlined blue value in the 'Your Code' column as shown below
 - This will move the information for this location up to the blank fields above the location table

The screenshot displays the NHSN Location Manager interface. On the left is a navigation menu with options: Event, Procedure, Summary Data, Import/Export, Auto CDA Sim, Analysis, Surveys, Users, Facility, Group, and Log Out. The 'Facility' option is selected, and the 'Locations' sub-option is highlighted with a red arrow labeled '2'. The main area contains a form for adding or editing a location. The form fields are: 'Your Code' (text box), 'Your Label' (text box), 'CDC Location Description' (dropdown menu with 'Inpatient Pediatric Rehabilitation Ward' selected, highlighted with a red arrow labeled '3'), 'Is this location a CMS IRF unit within a hospital?' (checkbox), 'Status' (dropdown menu with 'Active' selected), and 'Bed Size' (text box with '0'). A note states: 'A bed size greater than zero is required for most inpatient locations.' Below the form are three buttons: 'Find' (highlighted with a red arrow labeled '4'), 'Add', and 'Clear'. Below the form is a 'Location Table' with columns: Status, Your Code, Your Label, CDC Description, CDC Code, and Bed Size. The table contains one row with the following data: Status: Active, Your Code: 4W (highlighted with a red arrow labeled '5'), Your Label: REHAB, CDC Description: Inpatient Pediatric Rehabilitation Ward, CDC Code: IN:ACUTE:WARD:REHAB_PED, and Bed Size: 10. The table is paginated, showing 'Displaying 1 - 1 of 1'.

Instructions

- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One of more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the **Save** button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

Your Code*:

Your Label*:

CDC Location Description*: Inpatient Pediatric Rehabilitation Ward

Is this location a CMS IRF unit within a hospital?*: ☐

Status*: Active

Bed Size*: 0 A bed size greater than zero is required for most inpatient locations.

Find Add Clear

Location Table

Display All Print Location List

First | Previous | Next | Last

	Status	Your Code	Your Label	CDC Description	CDC Code	Bed Size
<input type="checkbox"/>	Active	4W	REHAB	Inpatient Pediatric Rehabilitation Ward	IN:ACUTE:WARD:REHAB_PED	10

First | Previous | Next | Last

Displaying 1 - 1 of 1

- If you wish to recognize this rehab location as an IRF unit, then change the response to 'Is this location a CMS IRF unit within a hospital' from 'No' to 'Yes'
- Enter the unit's CCN (see additional information regarding the CCN in Scenario A)
- Click the grey 'Save' button to save the new information for this location

Locations

HELP Instructions

- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One or more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the **Save** button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

Your Code*: 4W
 Your Label*: REHAB
 CDC Location Description*: Inpatient Pediatric Rehabilitation Ward
 Is this location a CMS IRF unit within a hospital?*: Y - Yes
 If Yes, specify the IRF CCN (will have an R or T in the 3rd position)*: 28T003
 Status*: Active
 Bed Size*: 10 A bed size greater than zero is required for most inpatient locations.

Find Save Clear

- Upon clicking 'Save', you'll be prompted to complete a brief annual survey that is specific to this rehab unit
 - Click 'Okay' to view and print the survey
 - Only answer the questions in the black Facility Details box (no further answers are needed as they were provided on the annual acute care facility survey)
 - Be sure to use data from the **full calendar year of 2011 for this specific rehab location**
 - Round all numbers to the nearest whole number as decimals will not be accepted (i.e., average daily census)

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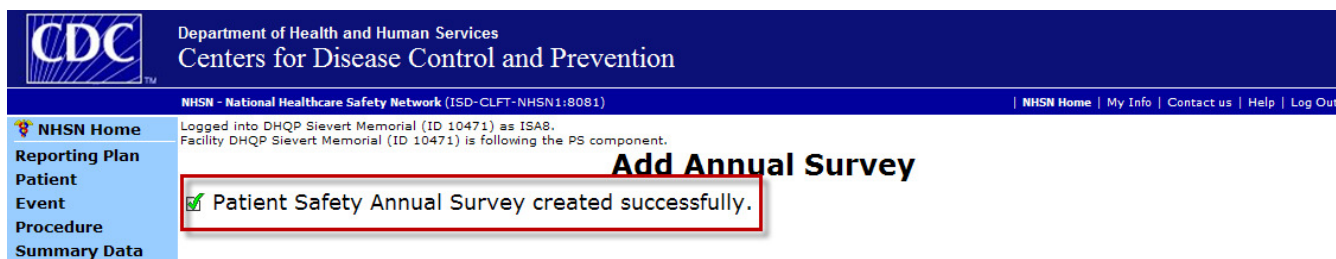
OMB No. 0920-0666
Exp. Date: 01-31-2015
www.cdc.gov/nhsn

Patient Safety Component—Annual Facility Survey for IRF

*required for saving	Tracking #:
*Facility ID:	*Survey Year:
Facility Characteristics	
*Ownership (check one):	
<input type="checkbox"/> For profit <input type="checkbox"/> Not for profit, including church <input type="checkbox"/> Government <input type="checkbox"/> Veterans Affairs	
*Affiliation (check one):	
<input type="checkbox"/> Independent <input type="checkbox"/> Multi-facility organization (specialty network) <input type="checkbox"/> Hospital system <input type="checkbox"/> Managed care organization	
*How would you describe your licensed inpatient rehabilitation facility? (check one)	
<input type="checkbox"/> Free-standing <input type="checkbox"/> Healthcare facility based	
Facility Details (CMS Licensed IRF Locations within hospitals fill out Facility Details section only)	
In the previous calendar year, indicate: <input type="checkbox"/> No CMS licensed IRF unit operational in this survey year	
*Total number of beds:	_____
*Average daily census:	_____
*Number of patient days:	_____
*Average length of stay:	_____
*Indicate the number of admissions with the primary diagnosis for each of the following rehabilitation categories (<i>must sum to the total number of admissions listed below</i>)	
a. Traumatic spinal cord dysfunction:	_____
b. Non-traumatic spinal cord dysfunction:	_____
c. Stroke:	_____
d. Brain dysfunction (non-traumatic or traumatic):	_____
e. Other neurologic conditions (e.g. multiple sclerosis, Parkinson's disease, etc):	_____
f. Orthopedic conditions (incl. fracture, joint replacement, other):	_____
g. All other admissions:	_____
*Total number of admissions:	_____
*Number of admissions on a ventilator:	_____
*Number of pediatric (≤ 18 years old) admissions:	_____
Facility Surveillance Policies	
*Number of trained or certified infection preventionists (IPs) in facility:	_____

Step 2: Adding the rehab-specific survey

- In the left-hand navigation bar, click on 'Surveys' and then 'Add'
 - From survey type drop down menu select 'REHSRV-PS – Survey for CMS IRF Unit'
 - Select 2011 as the survey year
 - Answer the questions using 2011 data for the rehab unit only
 - After entering all of the information click 'Save'
 - You will then receive a confirmation message that the survey has been created successfully



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Logged into DHQP Sievert Memorial (ID 10471) as ISA8.
Facility DHQP Sievert Memorial (ID 10471) is following the PS component.

Add Annual Survey

✓ Patient Safety Annual Survey created successfully.

Step 3: Add rehab location to reporting plan and begin reporting

- Add the rehab location to each month's reporting plan that you plan to do surveillance
 - Please note that only data from locations included in a month's reporting plan will be shared with CMS
- Enter all CAUTI events using the NHSN CAUTI criteria for each month of surveillance
- Enter summary data for urinary catheter days and patient days each month

Scenario C: Users with rehab locations currently mapped (through the reporting plan)

Step 1: Adding a reporting plan

- Click on 'Reporting Plan' on the left-hand navigation bar
 - Click on 'Add' to add the plan for any given month
- If user adds an Inpatient Rehab Ward or Inpatient Pediatric Rehab Ward using the location drop-down menu under the Device-Associated Module, Antimicrobial Use Module, or MDRO/CDI Module:
 - A message will pop up explaining that the location must be updated in the location manager before being added to the plan
 - Clicking 'OK' will take the user directly to the location manager screen to edit the rehab location
 - **NOTE: If user clicks 'OK' and is taken to the location manager screen, the plan has not been saved. The user must go back and re-enter the new plan with the updated rehab location.**
- If users clicks 'Copy from previous month' and an Inpatient Rehab Ward or Inpatient Pediatric Rehab Ward was copied over from the previous month under the Device-Associated Module, Antimicrobial Use Module, or MDRO/CDI Module:
 - After clicking 'Save' a message will pop up explaining that the location must be updated in the location manager before being added to the plan
 - Clicking 'OK' will take the user directly to the location manager screen
 - **NOTE: If user clicks 'OK' and is taken to the location manager screen, the plan has not been saved. The user must go back and re-enter the new plan with the updated rehab location.**

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Logged into Inter-Community Mem Hospital (ID 10376) as ISAB.
Facility Inter-Community Mem Hospital (ID 10376) is following the PS component.

Add Monthly Reporting Plan

✓ No data found for April, 2012

Mandatory fields marked with *

Facility ID: _____
Month: _____
Year: _____

Message from webpage

Your Inpatient Rehabilitation Unit must be updated in Location Manager in order to be used in-Plan. Click OK to continue or Cancel to use another location type.

OK Cancel

Device-Associated Module [HELP](#)

Locations: _____ CLA BSI DE VAP CAUTI CLIP

INREHWARD - INACUTE.WARD.REHAB

Add Row Clear All Rows Copy from Previous Month

Procedure-Associated Module [HELP](#)

Procedures: _____ SSI: _____ Post-procedure PNEU: _____

Add Row Clear All Rows Copy from Previous Month

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Logged into Inter-Community Mem Hospital (ID 10376) as ISAB.
Facility Inter-Community Mem Hospital (ID 10376) is following the PS component.

Locations

[HELP](#) **Instructions**

- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One of more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the **Save** button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

Your Code*: INREHWARD
Your Label*: INACUTE.WARD.REHAB
CDC Location Description*: Inpatient Rehabilitation Ward
Is this location a CMS IRF unit within a hospital?:
Status*: Active
Bed Size*: 10 A bed size greater than zero is required for most inpatient locations.

Find Save Clear

Step 2: Updating the existing rehab location

- Use the drop down menu to select 'Yes' or 'No' for the question 'Is this location a CMS IRF unit within a hospital'
- Upon selecting 'Yes,' you will be prompted to enter the IRF's CCN
 - It is very important to make sure you are correctly entering your CCN

- In order to qualify as a CMS IRF rehab unit within an acute care or critical access facility, the CCN must have a 'R' or 'T' in the 3rd position
 - If the CCN does not have a 'R' or 'T' in the 3rd position but instead has the last four digits between 3025-3099, the IRF must be enrolled as a separate facility and NOT as a location within the acute care facility
- Click the grey 'Save' button to save the new information for this location

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Logged into Inter-Community Mem Hospital (ID 10376) as ISAB.
Facility Inter-Community Mem Hospital (ID 10376) is following the PS component.

Locations

Instructions

- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One of more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the **Save** button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

Your Code*: INREHWARD

Your Label*: INACUTE-WARD-REHAB

CDC Location Description*: Inpatient Rehabilitation Ward

Is this location a CMS IRF unit within a hospital?*: Y - Yes 1

If Yes, specify the IRF CCN (will have an R or T in the 3rd position)*: 23T024 2

Status*: Active

Bed Size*: 10 A bed size greater than zero is required for most inpatient locations.

Find Save 3 Clear

- If you've selected 'Yes' and entered your CCN for your IRF, upon clicking 'Save', you'll be prompted to complete a brief annual survey that is specific to this rehab unit
 - Click 'Okay' to view and print the survey

Locations

HELP Instructions

- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One of more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the **Save** button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

CDC I
 Is this location a CMS IRF unit
 If Yes, specify the IRF CCN (will have
 position)
 Status*: Active
 Bed Size*: 10
 A bed size greater than zero is required for most inpatient locations.
 Find Save Clear

- Only answer the questions in the black Facility Details box (no further answers are needed as they were provided on the annual acute care facility survey)
 - Be sure to use data from the **full calendar year of 2011 for this specific rehab location**
 - Round all numbers to the nearest whole number as decimals will not be accepted (i.e., average daily census)

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Exp. Date: 01-31-2015
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Patient Safety Component—Annual Facility Survey for IRF

*required for saving	Tracking #:
*Facility ID:	*Survey Year:
Facility Characteristics	
*Ownership (check one):	
<input type="checkbox"/> For profit <input type="checkbox"/> Not for profit, including church <input type="checkbox"/> Government <input type="checkbox"/> Veterans Affairs	
*Affiliation (check one):	
<input type="checkbox"/> Independent <input type="checkbox"/> Multi-facility organization (specialty network) <input type="checkbox"/> Hospital system <input type="checkbox"/> Managed care organization	
*How would you describe your licensed inpatient rehabilitation facility? (check one)	
<input type="checkbox"/> Free-standing <input type="checkbox"/> Healthcare facility based	
Facility Details (CMS Licensed IRF Locations within hospitals fill out Facility Details section only)	
In the previous calendar year, indicate: <input type="checkbox"/> No CMS licensed IRF unit operational in this survey year	
*Total number of beds:	_____
*Average daily census:	_____
*Number of patient days:	_____
*Average length of stay:	_____
*Indicate the number of admissions with the primary diagnosis for each of the following rehabilitation categories (<i>must sum to the total number of admissions listed below</i>)	
a. Traumatic spinal cord dysfunction:	_____
b. Non-traumatic spinal cord dysfunction:	_____
c. Stroke:	_____
d. Brain dysfunction (non-traumatic or traumatic):	_____
e. Other neurologic conditions (e.g. multiple sclerosis, Parkinson's disease, etc):	_____
f. Orthopedic conditions (incl. fracture, joint replacement, other):	_____
g. All other admissions:	_____
*Total number of admissions:	_____
*Number of admissions on a ventilator:	_____
*Number of pediatric (≤ 18 years old) admissions:	_____
Facility Surveillance Policies	
*Number of trained or certified infection preventionists (IPs) in facility:	_____

Step 3: Adding the rehab-specific survey

- In the left-hand navigation bar, click on 'Surveys' and then 'Add'
 - From survey type drop down menu select 'REHSRV-PS – Survey for CMS IRF Unit'
 - Select 2011 as the survey year
 - Answer the questions using 2011 data for the rehab unit only

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Logged into DHQP Memorial Annex (ID 10401) as ISA8.
Facility DHQP Memorial Annex (ID 10401) is following the PS component.

Add Annual Survey

HELP

Print Survey for CMS IRF Unit

Mandatory fields marked with *

Facility ID: * DHQP Memorial Annex (ID 10401)

Survey Type: * REHSRV-PS - Survey for CMS IRF Unit

Survey Year: * 2011

In the previous calendar year, indicate: ☐ No CMS licensed IRF operational in this survey year

Total number of Beds: * 10

Average daily census: * 8

Number of Patient Days: * 250

Average length of stay: * 15

Indicate the number of admissions with the primary diagnosis for each of the following rehabilitation categories **(must sum to the total admissions listed below)**

a. Traumatic spinal cord dysfunction: * 4

b. Non-traumatic spinal cord dysfunction: * 8

c. Stroke: * 15

d. Brain dysfunction (non-traumatic or traumatic): * 7

e. Other neurologic conditions (e.g. multiple sclerosis, Parkinson's disease, etc): * 11

f. Orthopedic conditions (incl. fracture, joint replacement, other): * 19

g. All other admissions: * 6

Total number of admissions: 70

Number of admissions on a ventilator: * 11

Number of pediatric (<= 18 years old) admissions: * 12

Save Back

- After entering all of the information click 'Save'
- You will then receive a confirmation message that the survey has been created successfully

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Logged into DHQP Sievert Memorial (ID 10471) as ISA8.
Facility DHQP Sievert Memorial (ID 10471) is following the PS component.

Add Annual Survey

✓ Patient Safety Annual Survey created successfully.

Step 4: Return to the reporting plan

- Add the rehab location to each month's reporting plan that you plan to do surveillance
 - Please note that only data from locations included in a month's reporting plan will be shared with CMS
- Enter all CAUTI events using the NHSN CAUTI criteria for each month of surveillance
- Enter summary data for urinary catheter days and patient days each month